



Docket No. 58463/JPW/AG/LAD

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Harold J. Wanebo and Shashikant Mehta
 Serial No. : 09/287,884 Examiner: J.D. Anderson
 Filed : April 7, 1999 Group Art Unit: 1614
 For : COMBINATIONS OF CERAMIDE AND CHEMOTHERAPEUTIC AGENTS
FOR INDUCING CELL DEATH AND USES THEREOF IN TREATING CANCER

Mail Stop RCE
 COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, VA 22313-1450

Date: October 31, 2007

Sir:

Transmitted herewith is an amendment to the above-identified application.

X Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been previously established.

_____ A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.

_____ No additional fee is required.

The filing fee is calculated as follows:

	Number after Amendment	Highest Number Previously Paid For ¹	Number of Extra Claims Presented	RATE			FEE	
				Small Entity	Other Entity		Small Entity	Other Entity
Total Claims	14 -	* 26 =	*** 0 X	\$25	\$50	=	\$ 0	
Independent Claims	4 -	** 8 =	*** 0 X	\$105	\$210	=	\$ 0	
Multiple Dependent Claim(s) Presented For First Time _____ Yes <u>X</u> No				\$185	\$370	=	\$0	
				TOTAL ADDITIONAL FEE			\$ 0	

¹ The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.

* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

*** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".

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Amendment Transmittal Letter
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The following are also enclosed:

☒ One additional copy of this Amendment Transmittal Letter

☒ Return Receipt Postcard

☐ An Information Disclosure Statement, including Form PTO-1449
(Copies of citations included: Yes ☐ No ☐
and a fee of \$ ☐ included)

☐ A Petition for an Extension of Time, including a fee of
\$ ☐ for a Petition for ☐ Month(s) Extension of Time

☒ Other (identify): Request For Continued Examination

THE TOTAL FEE DUE IS \$ 635.00.

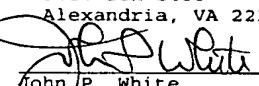
☒ A check in the amount of \$ 635.00 is enclosed.

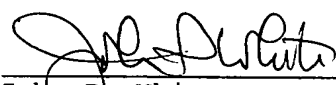
☐ Please charge Deposit Account No. ☐ in the amount of
\$ ☐.

☒ The Commissioner is hereby authorized to charge any additional fees
required or credit any overpayment to Deposit Account No. 03-3125
as follows:

☒ Fees under 37 C.F.R. \$1.16 for the presentation of extra claims
☒ Patent application processing fees under 37 C.F.R. \$1.17

Respectfully submitted,

I hereby certify that this
correspondence is being deposited this
date with the U.S. Postal Service with
sufficient postage as first class mail
in an envelope addressed to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450.
 06/31/07
John P. White Date
Reg. No. 28,678


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